PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09910574

CLAIMS AS FILED - PART I (Column 1)					(Colui	mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			33				Г	RATE	FEE	[RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGÉABLE CLAIMS			33 minus 20=		. 13			X\$ 9=		OR	X\$18=	234
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT							ļ	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	1104
CLAIMS AS AMENDED - PART II								l			OTHER	
(Column 1) (Column 2) (Column 2) (Column 2)								SMALL E		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN'	CLAIM			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		_(Colu	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						! 	+135=			+270=	
								+135=		OR	TOTAL	<u> </u>
										OR	ADDIT. FEE	
		(Column 1)			imn 2) HEST	(Column 3)						•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	\int	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEND			PENDEN	T CLAIM	1	J ├		-	1		†
*	If the entry in colu	mn 1 is less than t	the entry in colu	ımn 2 writ	ìe "0" in co	olumn 3		+135=		OR	+270=	<u></u>
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		nber Previously Pa					er foul	nd in the ap	propriate bo	x in co	olumn 1.	